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on

9-6-05

Jeffrey R. Kuester

In Re Application of:

Quinn, et al.

Serial No.: 09/473,667

Filed: December 29, 1999

Confirmation No.: 1291

Group Art Unit: 2645

Examiner: Anwah, Olisa

Docket No.: 190251-1760

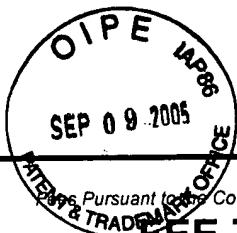
For: Integrated Tone-Based and Voice-Based Telephone User Interface

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal Page
RCE Transmittal Page
Fee Transmittal Page
Credit Card Authorization - Authorizing \$790.00
Response

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Customer No.: **38823**



Effective on 12/08/2004
Pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

Complete if Known

Application Number	09/473.667
Filing Date	December 29, 1999
First Named Inventor	Quinn, et al.
Examiner Name	Anwah, Olisa
Art Unit	2645
Attorney Docket No.	190251-1760

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 790.00

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☐ Deposit Account Deposit Account Number: 20-0778 Deposit Account Name: Thomas, Kayden, Horstemeyer Risley, L.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing Fees		Search Fees		Examination Fees		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee (\$)	Small Entity Fee(\$)	Fee (\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESSIVE CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent
Multiple dependent claims

<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
40	-20 or HP =	0	50	0	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if great than 20					360	0
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
47	-3 or HP =	0	200	0		
HP = highest number of total claims paid for, if great than 20						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =		(round up to a whole number) x	250 x	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
Other: RCE

Fee Paid (\$)
0
790.00

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	Jeffrey R. Kuester	Registration No.	34,367
Signature		Telephone Number	770-933-9500
		Date	9-6-05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send to Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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